



22 Jul 2025

Catherine Ardagh T.D
Dáil Éireann
Leinster House
Dublin 2

PQ 36985/25 : To ask the Minister for Health the total number of administrative staff and senior managerial staff in the HSE in 2005, 2015 and 2025, by grade, in tabular form; and if she will make a statement on the matter.

Dear Deputy Ardagh,

I refer to your recent parliamentary question in relation to staffing which was forwarded to the Health Services Executive (HSE) by the Department of Health for direct reply.

The Health Services Personnel Census (HSPC) is the official report on direct employment in the provision of Health & Social Care Services by the HSE and the various Section 38 hospitals & agencies. Staff are reported on the basis of staff category and group.

In responding to your question, it is important to firstly point out that staffing figures are not directly comparable, particularly over such an extended period of 20 years. In an effort to do so, based on our available data, the earliest date we can use to produce a modestly accurate response to this PQ is from 2009 onwards. The challenge in both reporting and comparability is owing to not only changes in demography and activity levels but also to significant changes in the configuration of our services. For example, the HSE has subsumed several section 38 and 39 organisations, on one hand, and conversely Tusla (formerly the Child & Family Agency) is now under the aegis of the Department of Children, Equality, Disability, Integration but included in the December 2009 figure. Similarly, the establishment of the new Health Regions is a further and more recent example of such significant changes in the configuration and delivery of our health services, all of which impact on our employment reports and therefore challenge direct comparisons over such a long period of time.

HSPC details at the end of May 2025, show that there were 149,110 WTE (equating to 167,882 personnel) directly employed in the provision of our services. The Deputy will be interested to note, this figure represents a +39,357 WTE increase (equating to +40,077 personnel increase) in employment levels over the years since December 2009. This growth is reflective of our changing demographic and demand for health services, service delivery expansion including the range and offering of our services, increases in regulatory, standards and compliance and advances in healthcare research, technology and range of procedures over this timeframe, alongside reconfiguration and reform of our health services (introduction of Hospital Groups, and Community Healthcare Organisations to establishment of more recent Health Regions and subsuming of other agencies). These changes and overall expansion in our workforce is particularly relevant as a key factor when reviewing the specific cadre of staff that is the focus of your PQ.

For the purposes of this PQ the relevant staff category is Management & Administrative. During the period requested by the Deputy, the staff category of Management & Administrative has also increased alongside the increase reported across the Health Services overall. HSPC details at the end of May 2025, show that were 24,838 (equating to 27,096 personnel) directly employed in the provision of our services under this staff category.

The table below shows both the WTE and Headcount as of December 2009, December 2015 and May 2025 of each of the grade groups under the staff category of Management & Administrative:



Staff Group / Grade Group 2009 - 2025	WTE Dec 2009	HC Dec 2009	WTE Dec 2015	HC Dec 2015	WTE May 2025	HC May 2025
Overall	17,611	20,008	16,162	18,182	24,838	27,096
Executive Management	231	236	239	240	446	453
Senior Management (VIII & GM)	1,018	1,047	1,089	1,117	2,111	2,173
Management (VIII & above)	1,249	1,283	1,327	1,357	2,557	2,626
Middle Management (V-VII)	3,810	4,143	3,751	4,057	9,011	9,500
Other Administrative	78	83	41	44	24	25
Administrative/ Supervisory (V to VII)	3,888	4,226	3,792	4,101	9,035	9,525
Clerical (III & IV)	12,474	14,499	11,043	12,724	13,246	14,945

Source: Health Service Personnel Census

Note¹: Health Sector staffing figures relate to direct employment levels as returned through the Health Service Personnel Census (HSPC) for the public health sector (HSE & Section 38 agencies)

Note²: Figures relating to service levels are expressed as whole-time equivalents (WTE) in order to take account of part-time working.

Note³: As this PQ relates to data over a 15 year period, during this time there were a number of mapping changes, system changes and organization changes that have been accommodated across the reports, and therefore may reflect slight variance to the then published reports at the time.

The above data shows that over the period there were a total of +7,227 WTE management and administrative staff, with 82% of this growth in the Clerical, Administrative and Supervisory roles. It may be useful for the Deputy to note the significant role that management and administrative staff play across our services. For example, clinical staff require other staff to support them in the delivery of health care services to patients. Clerical support enables medical consultants operate more efficiently by scheduling care, diagnostics, appointments etc. Similarly, ward clerks allow nurses on wards to engage in direct patient care to a greater extent freeing up valuable nursing resources from administrative duties performed more efficiently by clerical personnel. Likewise, no hospital or community service can operate without a manager to look after budgets, staff and buildings or can exist without recruitment or payroll or indeed procurement. Similarly, advances in technology have brought with it, the requirement for technology staff, also reported under the staff category of management and administrative, to deliver and maintain critical technology data systems, across the full spectrum of care and support services. It is equally important to point out that many of these clerical administrative and management staff also support critical service delivery, such as the staffing and management of specific services, such as screening services. In particular, these staff also played a key role in managing and staffing vaccination centers, along with contact tracing during the COVID-19 crisis.

The vast majority of management, clerical & administrative staff (over 85%) are employed in the front facing services of Hospital, Ambulance, Community Health & Wellbeing, Screening, Environmental Health, PCRS etc. and the remainder in central areas such as Finance, Human Resources, ICT, Legal etc. In addition, the HSE employs managerial staff at a variety of levels whose main responsibilities are the management and administration of groups of clinical areas (e.g. clinical directorates, or care groups), hospital level, or managing specific functions necessary for the safe and efficient delivery of the health service e.g. finance, human resources, or estates functions.

It is also important to point out that the HSE has for example subsumed various agencies and services as well as transfers out to other agencies over the extended timeframe covered by this request. The unwinding of the financial emergency measures has in the recent reversal of the Haddington Road Agreement also added to the requirement for additional staff to replace lost hours. There also has been substantial service developments, coupled with the demands brought by an ageing population, significantly increased regulatory & legislative requirements, in addition to increased levels of care and the expansion of the workforce required in the immediate and enduring response to COVID-19. In more recent times the additional requirement to meet the needs of international migrants and refugees such as our Ukraine response has also driven demand.



Workforce reports are available through the Health Services Personnel Census (HSPC), which is the official employment count for the public health service. The latest published information is routinely published [here](#).

I trust that this information is sufficient to meet the Deputy's needs.

Yours sincerely,

Dean Grennan

General Manager (Interim)